## West Valley Justice Court 3590 South Constitution Blvd West Valley City, Utah 84119 (801) 963-3590

## **RECORDS REQUEST**

| Requestor                     | 's Name   |  |  |
|-------------------------------|---|--|--|
| Address                       |   | City, State, Zip   |  |
| Daytime Phone #               |   | Date/Time of Request   |  |
| Email                         |   | Fax #  |  |
|                               |   | alley City Government Reco   | ords Access Management Act 63-2-101 et I would like to (circle one):                       |
| View or R                     | eceive a Copy of the  | following records describe   | d as:  |
|                               |   | to of Disth  |  |
|                               |   | te of Birth  |  |
| • •                           | opy Requested:  |  |  |
| Docket                        | Other Court Recor   | ds   | CD of Audio Files  |
| I believe th                  | nese records are on f   | le with the court and I am e   | ntitled to make this request because:  |
| □ I am<br>□ I am<br>atta      | n the victim in the case<br>n authorized to have ac<br>ched to this request     | <br>cess by the subject of the rec   | ontained in the record ord or by proper documentation which is                             |
| follows:  No control Cert Fax | charge for dockets up t<br>kets 8 pages or more \$<br>tified copy fee \$4.00 pe | o 7 pages. 62.00 (for each case) er court case plus .50 cents per euments under 10 pages, add per case up to 3 CDs | f court records. Those charges are as r page over 10 pages25 cents per page after 10 pages |
|                               |   |  | Date   |
|                               |   |  |  |
| Request re                    | viewed/completed by: _  | Date:  | Request mailed   |
|                               |   |  | ID verified by clerk   |
|                               |   |  | egin time Clerk end time   |